City/County Purchasing Division

Notice of Unit Price Project Over \$10,000

FAX NOTIFICATION TO: 441-6513

(prior to starting your project)

ATTN: <u>City/County Purchasing Division</u>

page 1 of ____

DATE:		the following questions refer to your project
Project Description :		
Est. Start Date:		Comments
Est. # of days to complete :		Comments
Primary Contractor		
Quoted Price	Attach/send Unit Price Quotation(s) from contractor	
Sub Contractor or other UP Contractor	Name	Amount
Sub Contractor or other UP Contractor	Name	Amount
Sub Contractor or other UP Contractor	Name	Amount
Project Manager NAME (City/Co Employee): printed Dept/Division/Agency:		
Project Manager Location :		
Project Location:		
SIGNATURE: PHONE # /Email: *******************************		
Reviewed by:	A	approved: YES NO (attach comments)
Date:	Signature:	